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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/978,221	10/16/2001	Qi Yu	USP1588A-OI2	4093
30265	7590	09/28/2007	EXAMINER	
RAYMOND Y. CHAN			COBANOGLU, DILEK B	
108 N. YNEZ AVE., SUITE 128			ART UNIT	PAPER NUMBER
MONTEREY PARK, CA 91754			3626	
			MAIL DATE	DELIVERY MODE
			09/28/2007	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary	Application No. 09/978,221	Applicant(s) YU, QI	
	Examiner Dilek B. Cobanoglu	Art Unit 3626	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) Responsive to communication(s) filed on 09 July 2007.
- 2a) This action is **FINAL**. 2b) This action is non-final.
- 3) Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) Claim(s) 54-91 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) Claim(s) _____ is/are allowed.
- 6) Claim(s) _____ is/are rejected.
- 7) Claim(s) _____ is/are objected to.
- 8) Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) The specification is objected to by the Examiner.
- 10) The drawing(s) filed on _____ is/are: a) accepted or b) objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) All b) Some * c) None of:
1. Certified copies of the priority documents have been received.
2. Certified copies of the priority documents have been received in Application No. _____.
3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|--|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413)
Paper No(s)/Mail Date. _____ |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08)
Paper No(s)/Mail Date _____ | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

Continued Examination Under 37 CFR 1.114

1. A request for continued examination under 37 CFR 1.114, including the fee set forth in 37 CFR 1.17(e), was filed in this application after final rejection. Since this application is eligible for continued examination under 37 CFR 1.114, and the fee set forth in 37 CFR 1.17(e) has been timely paid, the finality of the previous Office action has been withdrawn pursuant to 37 CFR 1.114. Applicant's submission filed on 07/09/2007 has been entered.
2. Claims 1-53 have been canceled. Claims 54-91 are newly added, claims 54-91 remain pending in this application.

Claim Rejections - 35 USC § 102

3. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(e) the invention was described in (1) an application for patent, published under section 122(b), by another filed in the United States before the invention by the applicant for patent or (2) a patent granted on an application for patent by another filed in the United States before the invention by the applicant for patent, except that an international application filed under the treaty defined in section 351(a) shall have the effects for purposes of this subsection of an application filed in the United States only if the international application designated the United States and was published under Article 21(2) of such treaty in the English language.

4. Claims 54-72, 76-78, 83-86 are rejected under 35 U.S.C. 102(e) as being unpatentable by Goldenberg (U.S. Patent Publication No.2002/0065682 A1).

A. Newly added claim 54 recites a method of providing distance-treatment for registered users through Internet, comprising the steps of:

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- (a) providing an information connection system comprising a computer, a visual signal producer and an audio signal producer, wherein said information connection system is arranged to be capable of communicating with a service provider through the Internet (Goldenberg; paragraphs 0009, 0010, 0011, 0015, 0038, 0054, 0059, 0061 and Fig. 8);
- (b) verifying and admitting said registered user to login said service provider through Internet (Goldenberg; paragraphs 0027, 0042 and 0044);
- (c) receiving a treatment request from said information connection system according to a diagnosis record of said registered user through the internet (Goldenberg; paragraphs 0011, 0016 and 0042);
- (d) based on said treatment request and a health information profile preset for said registered in said service provider, selecting a treatment information data package from a treatment information database provided by said service provider (Goldenberg; paragraphs 0011, 0016, 0017, 0055 and 0059); and
- (e) sending digital treatment signals of said treatment information data package to said computer of said information connection system through Internet to initiate a treatment operated by said information connection system on said registered user, wherein said treatment is selected from a group of consisting of an audio and visual treatment to said registered user via said audio device and said monitor respectively (Goldenberg; paragraphs 0017, 0027 and 0062).

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(f) feeding back a responsive health information of said registered user to the service provider for controlling and adjusting properties of said digital treatment signals of said treatment information data package to be sent from said service provider to said information connection system of said registered user (Goldenberg; paragraphs 0056), wherein the step (f) further comprises the steps of:

(f-1) detecting current health information of said registered user during said biological treatment (Goldenberg; paragraphs 0056);

(f-2) sending said detected current health information to said information connection system as said responsive health information through the Internet (Goldenberg; paragraphs 0056, 0059);

(f-3) feeding said responsive health information back to said service provider from said information connection system through the Internet (Goldenberg; paragraphs 0056);

(f-4) evaluating said digital treatment signals of said treatment information data package sent to said information connection system of said registered user with respect to said received responsive health information (Goldenberg; paragraphs 0056);

(f-5) adjusting said digital treatment signals of said treatment information data package to modified treatment information data package which contains updated digital treatment signals (Goldenberg; paragraphs 0059, 0062); and

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(f-6) sending said modified treatment information data package to said information connection system of said registered user through the Internet so as to transmit said updated digital treatment signals to said information connection system to update said control of said computer such that said current health information is continuously feeding back to said service provider so as to render said biological treatment becoming a live-treatment that said digital treatment signals of said treatment information data package is controlled and adjusted correspondingly through the Internet so as to provide a better and more effective primarily audio and visual treatment results (Goldenberg; paragraphs 0056, 0062, 0063).

B. Newly added claim 55 recites the method, as recited in claim 54, further comprising a step of providing a treatment instrument communicatively connected with said information connection system, wherein said treatment instrument is arranged to further include at least one addition treatment option as an additional treatment for said registered user apart from said audio and visual treatment (Goldenberg; paragraphs 0059).

C. Newly added claim 56 recites the method, as recited in claim 54, before said step (a), further comprising a step of providing said treatment information database and a health information database for said service provider, wherein said treatment information database includes a plurality of treatment information with respect to different kinds of classified health problem and said health

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information database includes health information profiles established for said registered users respectively, wherein each of said health information profiles includes a personal general information and a personal health information of said respective registered user (Goldenberg; paragraphs 0042, 0044, 0047).

D. Newly added claim 57 recites the method, as recited in claim 55, before said step (a), further comprising a step of providing said treatment information database and a health information database for said service provider, wherein said treatment information database includes a plurality of treatment information with respect to different kinds of classified health problem and said health information database includes health information profiles established for said registered users respectively, wherein each of said health information profiles includes a personal general information and a personal health information of said respective registered user (Goldenberg; paragraphs 0042, 0044, 0047).

E. Newly added claim 58 recites the method, as recited in claim 56, wherein said personal general information includes a specific user ID and a specific password registered by each of said registered users and a specific passcode assigned to each of said registered users by said service provider (Goldenberg; paragraphs 0042).

F. Newly added claim 59 recites the method, as recited in claim 57, wherein said personal general information includes a specific user ID and a specific password registered by each of said registered users and a specific passcode assigned to

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each of said registered users by said service provider (Goldenberg; paragraphs 0042).

G. Newly added claim 60 recites the method, as recited in claim 56, wherein said personal health information of each of said registered users includes personal physical information and a recent body test record of said respective registered user, and said health information profile of each of said registered users further comprises a diagnosis file recording a personal diagnosis information of said respective registered user (Goldenberg; paragraphs 0050).

H. Newly added claim 61 recites the method, as recited in claim 57, wherein said personal health information of each of said registered users includes personal physical information and a recent body test record of said respective registered user, and said health information profile of each of said registered users further comprises a diagnosis file recording a personal diagnosis information of said respective registered user (Goldenberg; paragraphs 0050).

I. Newly added claim 62 recites the method, as recited in claim 56, wherein the step (a) further comprises a step of registering said treatment instrument in said service provider so as to make a corresponding record in said health information profile of said respective registered user (Goldenberg; paragraphs 0038).

Examiner considers that treatment devices described in this reference are registered since they are controlled remotely.

J. Newly added claim 63 recites the method, as recited in claim 56, wherein the treatment information database includes a plurality of treatment information with

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respect to different kinds of classified health problem and diseases, wherein said treatment information is stored as said treatment information data package (Goldenberg; paragraphs 0033, 0038 and 0042).

K. Newly added claim 64 recites the method, as recited in claim 59, wherein the treatment information database includes a plurality of treatment information with respect to different kinds of classified health problem and diseases, wherein said treatment information is stored as said treatment information data package (Goldenberg; paragraphs 0033, 0038 and 0042).

L. Newly added claim 65 recites the method, as recited in claim 61, wherein the treatment information database includes a plurality of treatment information with respect to different kinds of classified health problem and diseases, wherein said treatment information is stored as said treatment information data package (Goldenberg; paragraphs 0033, 0038 and 0042).

M. Newly added claim 66 recites the method, as recited in claim 62, wherein the treatment information database includes a plurality of treatment information with respect to different kinds of classified health problem and diseases, wherein said treatment information is stored as said treatment information data package (Goldenberg; paragraphs 0033, 0038 and 0042).

N. Newly added claim 67 recites the method, as recited in claim 56, wherein step (b) comprises the steps of:

(b-1) receiving a login request from said information connection system of said registered user (Goldenberg; paragraphs 0042);

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(b-2) sending a login page to said information connection system of said registered user to collect said user ID, said password and said passcode of said respective registered user (Goldenberg; paragraphs 0042);

(b-3) authorizing said received user ID, password and passcode from said registered user by checking against all said personal general information of said health information profiles of said health information database (Goldenberg; paragraphs 0042); and

(b-4) sending said member page to said registered user when said user is verified as said registered user in record, wherein said member page is a tailored web- pages for allowing said registered user to access and amend said health information profile thereof, informing said current health condition of said registered user based on said health information profile of said registered user, providing list of health problems and diseases of said registered user, and placing said treatment request (Goldenberg; paragraphs 0042, 0050).

O. Claims 68, 69 and 70 repeat the same limitations as claim 67, therefore they are rejected for the same reasons given in the rejection of claim 67 above and incorporated herein.

P. Newly added claim 71 recites the method, as recited in claim 69, wherein after said verification of said registered user, said service provider recognizes said registered user and admits said registered user to make said treatment request to said service provider at said information connection system through the Internet, wherein in responsive to said treatment request of said registered

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user, said service provider sends said respective registered user a treatment page which may include a list of said health problems and diseases that said registered user suffers, treatment opinions from doctors, recommendation of beneficial foods and activities for each of said listed health problems and diseases of said registered user, recommended biological treatments with respect to said listed health problems and diseases that said registered user suffers respectively, and information of suggested treatment instrument for executing each recommended biological treatment (Goldenberg; paragraphs 0042, 0050).

Q. Claim 72 repeats the same limitations as claim 71, therefore it is rejected for the same reasons given in the rejection of claim 71 above and incorporated herein.

R. Newly added claim 76 recites the method, as recited in claim 56, wherein the step (d) further comprises the steps of:

(d-1) enabling said registered user to select said particular health problem and disease to be treated from said list of said health problems and diseases that said registered user suffers (Goldenberg; paragraphs 0048, 0050);

(d-2) enabling said registered user to select said specific recommended biological treatment with respect to said selected health problem or disease as said primary treatment (Goldenberg; paragraphs 0055-0056);

(d-3) calling said personal general information and personal health information of said health information profile of said registered user from said

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health information database to reference said specific recommended biological treatment selected by said registered user (Goldenberg; paragraphs 0050);

(d-4) selecting, by said service provider, said specific treatment information data package from said treatment information database regarding to said selected recommended biological treatment and said health information profile of said registered user, wherein said treatment information data package contains said digital treatment signals adapted for controlling said specific treatment instrument connected to said information connection system of said registered user (Goldenberg; paragraphs 0050, 0053); and

(d-5) sending said treatment information data package to said information connection system of said registered user through the Internet so as to transmit said digital treatment signals to said information connection system for controlling said treatment instrument (Goldenberg; paragraphs 0017, 0050).

S. Claims 77 and 78 repeat the same limitations as claim 76, therefore they are rejected for the same reasons given in the rejection of claim 76 above and incorporated herein.

T. Newly added claim 83 recites a system of providing distance-treatment for registered users through Internet, comprising:

- i. a service provider providing a treatment information database and a health information database, wherein said treatment information database includes a plurality of treatment information with respect to different kinds of classified health problem and said health information database includes

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health information profiles established for said registered users respectively, wherein each of said health information profiles includes a personal general information and a personal health information for said respective registered user (Goldenberg; paragraphs 0029, 0040, 0050, figure 8);

ii. an information connection system comprising a monitor and a computer adapted to be operated by said registered user; a network networking said information connection system with said service provider for data communication through the Internet, wherein said computer and said monitor are arranged to initialize a primary treatment for said registered user in an audio and visual format (Goldenberg; paragraphs 0009, 0010, 0054, 0055, 0056, 0061); and

iii. wherein a treatment information data package sent from said service provider via said information connection system through the Internet to provide digital treatment signals to control said treatment, wherein said treatment information data package is selected from said treatment information database based on a treatment request sent from said information connection system to said service provider and said health information profile of said registered user in said service provider (Goldenberg; paragraphs 0055, 0061, 0062);

iv. wherein a responsive health information of said registered user is fed back to said service provider for controlling and adjusting properties of

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said digital treatment signals of said treatment information data package to be sent from said service provider to said information connection system of said registered user, wherein when a current health information of said registered user is detected during said biological treatment, said detected current health information is sent to said information connection system as said responsive health information such that said responsive health information is fed back to said service provider from said information connection system through the Internet, wherein said digital treatment signals of said treatment information data package is evaluated and sent to said information connection system of said registered user with respect to said received responsive health information, wherein said digital treatment signals of said treatment information data package is then adjusted to modified treatment information data package which contains updated digital treatment signals, wherein said modified treatment information data package is sent to said information connection system of said registered user through the Internet so as to transmit said updated digital treatment signals to said information connection system to update said primary treatment (Goldenberg; paragraphs 0055, 0061, 0062).

U. Newly added claim 84 recites the system, as recited in claim 83, further comprising at least one treatment instrument communicatively connected with said information connection system which is arranged to provide additional

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treatment to said registered users apart from said primary treatment in said visual and audio format (Goldenberg; paragraphs 0061, 0062).

V. Newly added claim 85 recites the system, as recited in claim 84, wherein said service provider comprises a Web Server, said information connection system comprises a personal computer and said network is an Internet which is a data transmission network connecting said service provider and said information connection system (Goldenberg; paragraphs 0009, 0010, 0027, 0042, figure 8).

W. Newly added claim 86 repeats the same limitations as claim 85, therefore it is rejected for the same reasons given in the rejection of claim 85 above and incorporated herein.

Claim Rejections - 35 USC § 103

5. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

6. Claims 73-75, 79-80, 81-82, 87-88 are rejected under 35 U.S.C. 103(a) as being anticipated over Goldenberg (U.S. Patent Publication No. 2002/0065682 A1) in view of Albert et al. (hereinafter Albert) (U.S. Patent No. 5,735,285).

A. As per new claims 73, 74 and 75, Goldenberg discloses the method, as recited in claims 56, 71 and 72.

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Goldenberg fails to expressly teach decoding digital treatment signals into analog treatment signals, per se, since it appears that Goldenberg is more directed to teach receiving and transmitting signals (Goldenberg; par. 0017) decode the data for further processing and to encode responses to be transmitted to the remote user location (Goldenberg; par. 0040).

However, this feature is well known in the art, as evidenced by Albert.

In particular, Albert discloses decoding said digital treatment signals into analog treatment signals (Albert; col. 4, lines 1-8).

It would have been obvious to one having ordinary skill in the art at the time of the invention to include the aforementioned limitation as disclosed by Goldenberg with the motivation of further demodulation, review and opinion (Albert; col. 4, lines 1-8).

B. Newly claims 79, 80 recite the method, as recited in claim 55, wherein after the step (f-1) and before the step (f-2), said current health information detected are analog signals (Goldenberg; par. 0017, 0038, 0059) which are converted into digital signals of said responsive health information for transmitting back to said service provider through the Internet.

- The obviousness of modifying the teaching of Goldenberg to include converting analog signals into digital signals (as taught by Albert) is as addressed above in the rejection of claim 73 and incorporated herein.

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C. Newly added claim 81 recites the method, as recited in claim 79, wherein said responsive health information of said registered user is obtained by requesting said registered user to input said responsive health information, including a feeling, progress and symptom of said registered user, so as to control and adjust said digital treatment signals of said treatment information data package to be sent from said service provider to said information connection system of said registered user (Goldenberg; par. 0059, 0061).

D. Claim 82 repeats the same limitations as claim 81, therefore it is rejected for the same reasons given in the rejection of claim 81 above and incorporated herein.

E. Newly added claim 87 recites the system, as recited in claim 86, further comprising a decoder connected between said information connection system and said treatment instrument which is an independent analog instrument, wherein said decoder converts said digital treatment signals received by said information connection system from said service provider to respective analog signals to control said treatment of said treatment instrument.

Goldenberg fails to expressly teach a decoder connected between said information connection system and said treatment instrument which is an independent analog instrument, wherein said decoder converts said digital treatment signals received by said information connection system from said service provider to respective analog signals to control said treatment

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of said treatment instrument. However, this feature is well known in the art, as evidenced by Albert.

In particular, Albert discloses a decoder connected between said information connection system and said treatment instrument which is an independent analog instrument, wherein said decoder converts said digital treatment signals received by said information connection system from said service provider to respective analog signals to control said treatment of said treatment instrument (Albert; col. 4, lines 1-8).

It would have been obvious to one having ordinary skill in the art at the time of the invention to include the aforementioned limitation as disclosed by Goldenberg with the motivation of further demodulation, review and opinion (Albert; col. 4, lines 1-8).

F. Newly added claim 88 recites the system, as recited in claim 87, wherein said treatment instrument comprises a power source and an information input connection (Goldenberg; par. 0059), and said decoder is an internal decoder installed in said information connection system and provides a data outlet port to be connected to said information input connection of said treatment instrument.

Goldenberg fails to expressly teach an internal decoder installed, per se, since it appears that Goldenberg is more directed to teach receiving and transmitting signals (Goldenberg; par. 0017) decode the data for further processing and to encode responses to be transmitted to the remote user

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location (Goldenberg; par. 0040). However, this feature is well known in the art, as evidenced by Albert.

In particular, Albert discloses an internal decoder installed in said information connection system and provides a data outlet port to be connected to said information input connection of said treatment instrument (Albert; col. 3; lines 50-67 and col. 4, lines 1-8).

It would have been obvious to one having ordinary skill in the art at the time of the invention to include the aforementioned limitation as disclosed by Goldenberg with the motivation of further demodulation, review and opinion (Albert; col. 4, lines 1-8).

7. Claim 89 is rejected under 35 U.S.C. 103(a) as being anticipated over Goldenberg (U.S. Patent Publication No. 2002/0065682 A1) and Albert et al. (hereinafter Albert) (U.S. Patent No. 5,735,285) in view of Khaled et al. (hereinafter Khaled) (U.S. Patent No. 5,416,804).

A. As per claim 89, Goldenberg and Albert disclose the system, as recited in claim 88.

Goldenberg and Albert fail to expressly teach an external decoder physically connected between said information connection system and said treatment instrument, per se, since it appears that Goldenberg is more directed to teach receiving and transmitting signals (Goldenberg; par. 0017) decode the data for further processing and to encode responses to be transmitted to the remote user location (Goldenberg; par.

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0040) and Albert is more directed to an internal decoder (Albert; col. 3, line 50 to col. 4, line 8). However, this feature is well known in the art, as evidenced by Khaled.

In particular, Khaled discloses an external decoder physically connected between said information connection system and said treatment instrument (Khaled; abstract, col. 3; lines 19-47 and Fig. 1, 5 and 6).

It would have been obvious to one having ordinary skill in the art at the time of the invention to include the aforementioned limitation as disclosed by Khaled with the motivation of error correlation at the output of the internal decoder (Khaled; col. 4, lines 50-53).

8. Claim 90 is rejected under 35 U.S.C. 103(a) as being unpatentable over Goldenberg (U.S. Patent Publication No. 2002/0065682 A1), Albert et al. (hereinafter Albert) (U.S. Patent No. 5,735,285), Khaled et al. (hereinafter Khaled) (U.S. Patent No. 5,416,804) and further in view of Swing (U.S. Patent No. 6,522,929 B2).

A. As per claim 90, Goldenberg discloses the system, as recited in claim 89.

Goldenberg fails to expressly teach an electrical acupuncture, per se, since it appears that Goldenberg is more directed to teach a treatment device, which can perform both therapeutic and diagnostic procedures (Goldenberg; par. 0017 and 0059). However, this feature is well known in the art, as evidenced by Swing.

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In particular, Swing discloses an electrical acupuncture device for operating electrical acupuncture treatment (Swing; par.0011)

It would have been obvious to one having ordinary skill in the art at the time of the invention to include the aforementioned limitation as disclosed by Swing with the motivation of healing a injury of a patient using electrical stimulation and/or needles (Swing; par.0011).

9. Claim 91 is rejected under 35 U.S.C. 103(a) as being anticipated over Goldenberg (U.S. Patent Publication No. 2002/0065682 A1), Albert et al. (hereinafter Albert) (U.S. Patent No. 5,735,285), Khaled et al. (hereinafter Khaled) (U.S. Patent No. 5,416,804), Swing (U.S. Patent No. 6,522,929 B2) and further in view of Bologna (U.S. Patent Publication 2003/0023129).

A. As per claim 91, Goldenberg discloses the system, as recited in claim 89.

Goldenberg fails to expressly teach an electromagnetic wave generator for producing electromagnetic waves with a predetermined frequency, ranging from 1 Hz to 530,000 Ghz, and intensity, ranging from 1 mV to 10 mV, per se, since it appears that Goldenberg is more directed to an electronic inquiry-based information system (Goldenberg; pa. 0015).

However, this feature is well known in the art, as evidenced by Bologna.

In particular, Bologna discloses an electromagnetic wave generator for producing electromagnetic waves with a predetermined frequency,

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ranging from 1 Hz to 530,000 Ghz, and intensity, ranging from 1 mV to 10 mV (Bologna; par.0011 and 0026).

It would have been obvious to one having ordinary skill in the art at the time of the invention to include the aforementioned limitation as disclosed by Swing with the motivation of electromagnetic wave generator is being reliable and safe (Bologna; par.0026).

Response to Arguments

10. Applicant's arguments filed 07/09/2007 have been fully considered but they are not persuasive. Applicant's arguments will be addressed below in the order in which they appear.

A. In response to Applicant's argument that Goldenberg does not teach "treatment of prospective patients can be accomplished by audio and visual strategies via the monitor and the audio device as coordinated by the computer of the information connection system"; Examiner respectfully submits that Goldenberg teaches "An interactive network-based health information system provides up-to-date medical information directly to a user... The system provides for remote monitoring and diagnosis of the patient and for remote treatment." in abstract; "...At a fourth level of service, the system physically interacts with the patient, using monitoring devices or treatment devices. The system communicates messages to and from the devices to monitor patient parameters and to administer management advice, including monitoring or treatment, such as with drugs or other chemicals." in paragraph 0011; "...At the highest level of

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service according to the invention, advances in telemedicine are incorporated in this virtual doctor web site by linking diagnostic systems available in the home or in local medical facilities to the central web site in order to transmit physical and chemical findings and data for analysis by the advising health professionals. These could involve, for example, cardiac and circulatory functions, blood tests, urinalysis, sputum tests, etc., which can be used to monitor the patient. It is also envisioned that this can be an interactive treatment system, whereby the central monitor can send signals to a monitor in the patient that controls the discharge of energy impulses, chemicals, and drugs that regulate the patient's body functions." in paragraph 0027 and "A patient-viewing camera may be necessary, for example, for examination of certain physical signs (e.g., neurological status, mental state and functions, dermatological signs, etc.). The system can also provide two-way and multiple-party video conferencing services, that allows video conferencing by two or more parties." in paragraph 0061. Examiner considers that since there is a video conferencing between the patient and the medical professionals, the treatment can be accomplished by audio and visual strategies.

B. In response to Applicant's argument that Goldenberg does not teach "a step of providing a treatment information database and a health information database for the service provider"; Examiner respectfully submits that Goldenberg teaches "...At the highest level of service according to the invention, advances in telemedicine are incorporated in this virtual doctor web site by linking diagnostic

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systems available in the home or in local medical facilities to the central web site in order to transmit physical and chemical findings and data for analysis by the advising health professionals. These could involve, for example, cardiac and circulatory functions, blood tests, urinalysis, sputum tests, etc., which can be used to monitor the patient." in paragraph 0027, and Examiner considers that the patient data should be saved in a database (health information database) for future reference and also for privacy of the patient's personal information. Also, Goldenberg teaches in paragraph 0031 that "An information retrieval system that allows the latest available knowledge or article on a specific medical subject to be forwarded to the client, and the level of complexity of this information is requested in advance by the client. This level could be in several categories, for example, such as very basic (little medical knowledge), more sophisticated (more medical knowledge, but still for the layman), and advanced medical knowledge (for the health care professional)."

C. In response to Applicant's argument that Goldenberg does not teach "personal general information includes a specific user ID and a specific password registered by each of the registered users" Examiner respectfully submits that Goldenberg teaches "When the user accesses the system in step 301 the system reads an inquiry from the user and recognizes it as an inquiry. The inquiry in step 301 could merely be an indication that information is desired, such as clicking in a portion of a web page, or it may, as an example, be a question formulated in a text entry field. The processor responds at step 302 by transmitting information to

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identify the user and the appropriate level of system access. One way of transmitting the data is to transmit a menu screen which requires the user to fill in certain fields with a user ID and password as would be known to those of ordinary skill." in paragraph 0042.

D. In response to Applicant's argument that Goldenberg does not teach "personal health information of each of the registered users includes personal physical information and a recent body test record" Examiner respectfully submits that Goldenberg teaches "At the highest level of service according to the invention, advances in telemedicine are incorporated in this virtual doctor web site by linking diagnostic systems available in the home or in local medical facilities to the central web site in order to transmit physical and chemical findings and data for analysis by the advising health professionals. These could involve, for example, cardiac and circulatory functions, blood tests, urinalysis, sputum tests, etc., which can be used to monitor the patient." Also, Goldenberg teaches in paragraph 0061 that "The interactive level of the system may also provide image data. The image data allows remote observation of a patient's condition, preferably both internal and external. The image data may include, for example, medical imaging data (such as from nuclear, computed tomography, ultrasound, X-ray, and other imaging cameras and systems at a medical facility) and patient-viewing data, which thereby allows the patient to be viewed by the doctor at a remote location. A patient-viewing camera may be, for example, a still-motion camera or a video camera. A patient-viewing camera may be necessary, for

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example, for examination of certain physical signs (e.g., neurological status, mental state and functions, dermatological signs, etc.). The system can also provide two-way and multiple-party video conferencing services, that allows video conferencing by two or more parties. Image data can thus be used for a variety of functions, including without limitation, monitoring, diagnostic, and therapeutic/treatment. Further, the imaging equipment can be considered to be a monitoring device, a diagnostic device, and a therapeutic or treatment device, depending upon the application."

E. In response to Applicant's argument that Goldenberg does not teach "treatment information database includes a plurality of treatment information with respect to different kinds of classified health problem and diseases" Examiner respectfully submits that Goldenberg teaches in paragraph 0031 that "An information retrieval system that allows the latest available knowledge or article on a specific medical subject to be forwarded to the client, and the level of complexity of this information is requested in advance by the client. This level could be in several categories, for example, such as very basic (little medical knowledge), more sophisticated (more medical knowledge, but still for the layman), and advanced medical knowledge (for the health care professional)."

F. In response to Applicant's argument that Goldenberg does not teach "the steps of receiving the login request, sending the login page, authorizing the received user ID, and sending the member page" Examiner respectfully submits that Goldenberg teaches in paragraph 0042 that "When the user accesses the

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system in step 301 the system reads an inquiry from the user and recognizes it as an inquiry. The inquiry in step 301 could merely be an indication that information is desired, such as clicking in a portion of a web page, or it may, as an example, be a question formulated in a text entry field. The processor responds at step 302 by transmitting information to identify the user and the appropriate level of system access. One way of transmitting the data is to transmit a menu screen which requires the user to fill in certain fields with a user ID and password as would be known to those of ordinary skill."

G. In response to Applicant's arguments against the references individually, one cannot show nonobviousness by attacking references individually where the rejections are based on combinations of references. See *In re Keller*, 642 F.2d 413, 208 USPQ 871 (CCPA 1981); *In re Merck & Co.*, 800 F.2d 1091, 231 USPQ 375 (Fed. Cir. 1986). In addition, the test for obviousness is not whether the features of a secondary reference may be bodily incorporated into the structure of the primary reference; nor is it that the claimed invention must be expressly suggested in any one or all of the references. Rather, the test is what the combined teachings of the references would have suggested to those of ordinary skill in the art. See *In re Keller*, 642 F.2d 413, 208 USPQ 871 (CCPA 1981).

With respect to Applicant's argument that Goldenberg fails to teach certain features recited in claims 73-75, the Examiner respectfully submits that the Albert reference, and not Goldenberg, *per se*, that was relied upon for the specific

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teaching of features such as decoding said digital treatment signals into analog treatment signals. Goldenberg was relied for primarily teaching remote monitoring, diagnosing and treatment of a patient; the treatment device receives a treatment signal from the server over the network and is adapted to administer a treatment to the patient based on the treatment signal received (Goldenberg; abstract and paragraph 0017). Thus, the proper combination of the applied references would the incorporation of Albert's use of elements such as decoding digital treatment signals into analog treatment signals within Goldenberg's network of remote monitoring and treatment with signals.

Also, with respect to Applicant's argument that Goldenberg fails to teach certain features recited in claims 90-91, the Examiner respectfully submits that the Swing and Bologna references, and not Goldenberg, *per se*, that was relied upon for the specific teaching of features such as an electrical acupuncture and electromagnetic wave generator as treatment devices. Goldenberg was relied for primarily teaching remote monitoring, diagnosing and treatment of a patient; the treatment device receives a treatment signal from the server over the network and is adapted to administer a treatment to the patient based on the treatment signal received (Goldenberg; abstract and paragraph 0017). Thus, the proper combination of the applied references would the incorporation of Swing's use of elements such as an electrical acupuncture as a treatment device and Bologna's use of elements such as electromagnetic wave generator as a treatment device within Goldenberg's network of remote monitoring and treatment with signals.

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H. In response to Applicant's argument that Goldenberg does not teach "the recommended biological treatment can be in the form of the primary treatment" Examiner respectfully submits that Goldenberg teaches in paragraph 0056 that "If at step 706 it is determined that the patient is equipped for online treatment, then at step 708 information is transmitted in a format that can be recognized by the treatment equipment to apply the treatment to the patient. For example, the processor could command the treatment device to inject the patient with drugs or other chemicals. At step 709 the patient's reactions are monitored. If at step 710 the processor determines that the patient's reactions are normal, then at step 711 the parameters are recorded and other level 4 functions can then be performed. On the other hand, if at step 710 the processor determines that the patient's reactions are out of the normal range, then a message is sent at step 712 to the patient and to the health care professional and monitoring continues at step 709. The remote treatment may also be performed in increments, with monitoring between successive treatment steps. An incremental approach thus allows further treatment after an abnormal reaction."

I. In response to Applicant's argument that Goldenberg does not teach "the service provider comprises a Web server" Examiner respectfully submits that Goldenberg teaches in paragraph 0027 that "...One convenient way of implementing such a system is to provide a site on the world wide web of the Internet which can be accessed by the users.", and in paragraph 0015, Goldenberg teaches "Briefly, according to another aspect of the present

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invention, there is provided a server for an electronic inquiry-based information system, intended for use with a computer connected to the server over a network." And in paragraph 0009 that "...a networked computer system which communicates with the user and allows the user access to one or more levels of service. Such a system would typically have a computer acting as a server receiving messages from the user and routing information and messages between the user and other computers or communications devices which interface with professionals. Communication with such a system can take place over a public data communications network, the Internet being one example of such a network."

J. In response to applicant's argument that the references fail to show certain features of applicant's invention, it is noted that the features upon which applicant relies (i.e., "medical treatment in the forms of audio and visual interaction, analog treatment devices are served to fulfill additional treatment function, and the use of acupuncture treatment in an Internet based distance treatment system in which audio and visual treatments (via a computer and nothing else)) are not recited in the rejected claim(s). Although the claims are interpreted in light of the specification, limitations from the specification are not read into the claims. See *In re Van Geuns*, 988 F.2d 1181, 26 USPQ2d 1057 (Fed. Cir. 1993).

Conclusion

11. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure. The cited but not applied art teach "Electrotherapy acupuncture

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apparatus and method 4556064 A, Interactive patient assistance device 4933873 A, Interactive patient assistance and medication delivery systems responsive to the physical environment of the patient 5036462 A, System for monitoring patient by using LAN 5038800 A, Networked health care and monitoring system 5410471 A, System for monitoring and reporting medical measurements 5549117 A, Patient monitor and support system 5558638 A, Computerized medical diagnostic and treatment advice system including network access 6022315 A, Therapeutic behavior modification program, compliance monitoring and feedback system 6039688 A, Method and apparatus for photon therapy 6221095 B1, Method and system for reversing physiological changes in human beings using acupuncture and hypnosis 6237603 B1, System and method for generating and transferring medical data 6264614 B1, Treatment of peripheral vascular disease, leg cramps and injuries using needles and electrical stimulation 20010031989, Method for sharing information concerning medical treatment of an individual 20010034617, Method and system for managing chronic disease and wellness online 20010039503, Method and system for monitoring and treating a patient 20020120187"

12. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Dilek B. Cobanoglu whose telephone number is 571-272-8295. The examiner can normally be reached on 8-4:30.

13. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on 571-272-6776. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

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14. Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

DBC

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